

**REPORT ON VOLUNTARY PLACEMENT AGREEMENTS – CHILDREN AND YOUNG  
ADULTS**

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MARYLAND DEPARTMENT OF HUMAN SERVICES

*Completed pursuant to Family Law Article § 5-505.1*

December 1, 2022

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## REPORTING REQUIREMENTS

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This report is hereby submitted pursuant to § 5-505.1 of Maryland's Family Law Article, which provides as follows:

- 1) *The total number of voluntary placement agreements that were both approved and denied;*
- 2) *The number of voluntary placement agreements that were requested for behavioral health reasons, including voluntary placement agreements that were requested for children with a developmental disability who are also diagnosed with a behavioral health disorder, and the number of voluntary placement agreements requested for children with a developmental disability who are not also diagnosed with a behavioral health disorder;*
- 3) *The reason for any denials; and*
- 4) *For voluntary placement agreements that were approved, the type of initial placement, including: residential treatment center, group home placement, therapeutic group home, diagnostic placement, therapeutic foster home, and any other type of placement.*
- 5) *The report shall group the information required above by the following regions:*
  - a. *Baltimore region, consisting of Baltimore City, Baltimore County, and Harford County;*
  - b. *Eastern Shore, consisting of Caroline County, Cecil County, Dorchester County, Kent County, Queen Anne's County, Somerset County, Talbot County, Wicomico County, and Worcester County;*
  - c. *Metro Region, consisting of Howard County, Montgomery County, and Prince George's County;*
  - d. *Southern Maryland, consisting of Anne Arundel County, Calvert County, Charles County, and St. Mary's County; and*
  - e. *Western Maryland, consisting of Allegany County, Carroll County, Frederick County, Garrett County, and Washington County.*

*Submission of report. -- On or before December 1 each year, the Administration shall submit the report required under this section to the Governor and, in accordance with § 2-1257 of the State Government Article, the General Assembly.*

*Source: Family Law Article § 5-505.1*

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## BACKGROUND

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The *Children with Disabilities - Voluntary Placement Agreement (VPA) Act* was enacted to provide a voluntary out-of-home placement for a child with a documented developmental disability or mental illness when treatment needs related to the disability cannot be met within the community or with home-based interventions.

The goal of a VPA is for the child to receive the treatment that is needed for his or her disability or mental illness, and then to return home. A VPA can remain in effect until a child has completed treatment and is ready for discharge from an out-of-home placement with a recommendation for returning home. The permanency plan for the child under a VPA is always reunification.

The parent or legal guardian of a child with a developmental disability or mental illness with treatment needs is given the opportunity to apply for a VPA with the Local Department of Social Services (LDSS) serving their jurisdiction. The LDSS completes an assessment and submits the information to the Department of Human Services/Social Services Administration (DHS/SSA) for approval.

DHS/SSA is able to approve a VPA based on the following criteria:

1. LDSS completes an assessment of the family's needs.
2. LDSS demonstrates reasonable efforts to prevent the placement.
3. The interagency Local Care Team provides written decisions/recommendations including information about non-availability of needed resources.
4. Child requires a restrictive out-of-home placement and the reason for placement is appropriate.
5. LDSS documents that the child meets voluntary placement criteria for developmental disability or mental illness.
6. Child Support Requirement - The parent agrees to pay child support during the child's placement. A binding legal agreement (Consent Order or Affidavit of Support) must be established with the Child Support Administration.
7. A placement must be identified prior to SSA approving the VPA.

When a child is referred for a voluntary placement, as with any type of placement, the referral is evaluated to determine whether all other resources have been exhausted to prevent the child's placement. Separation from family for a child can be very traumatic; therefore, an out-of-home placement is the last option for a child and case documentation must demonstrate a need that can only be met by an out-of-home residential treatment provider.

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**TOTAL NUMBER OF VOLUNTARY PLACEMENT AGREEMENTS IN FY 2022 THAT WERE APPROVED AND DENIED**

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Table 1 provides data on the total number of VPAs that were approved and denied/withdrawn, by region.

**Table 1**

	<b>Approved</b>	<b>Denied</b>
Baltimore Region	10	24
Eastern Shore	10	22
Metro Region	5	14
Southern Maryland	3	17
Western Maryland	9	3
<b>Total</b>	<b>37</b>	<b>80</b>

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**NUMBER OF VOLUNTARY PLACEMENT AGREEMENTS REQUESTED**

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DHS/SSA collects data on all VPAs requested at the LDSS level and submitted to DHS/SSA. Table 2 provides data on the reasons VPAs were requested. Of the 117 cases requested, over 75% of VPAs were due to the child’s behavioral health needs.

**Table 2**

	<b>Behavioral Health (BH)</b>	<b>Developmental Disability (DD)</b>	<b>Both BH and DD</b>	<b>VPA Criteria Unknown</b>
Baltimore Region	27	1	2	12
Eastern Shore	27	0	3	3
Metro Region	5	0	2	0
Southern Maryland	19	0	1	0
Western Maryland	13	1	1	0
<b>Total</b>	<b>91</b>	<b>2</b>	<b>9</b>	<b>15</b>

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## REASONS FOR VOLUNTARY PLACEMENT AGREEMENTS DENIALS

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Of the 80 denials in FY 2022, the majority of VPAs were denied because the parent withdrew from the VPA process, did not follow through or did not meet the VPA criteria. The second most common reason for reported denials were due to community-based and in-home resources not being exhausted prior to considering a VPA. Other reasons for denial include:

- Child in Need of Assistance (CINA) petition - If there is abuse or neglect and the child is determined to be in danger, then the LDSS would file a CINA petition with the Juvenile Court. If the child needs to be placed in foster care because of abuse or neglect, then the family would no longer be eligible or appropriate for a VPA and would be considered a denial.
- Documentation was insufficient to support the need - parents did not submit sufficient documentation by a psychologist, psychiatrist, or physician.
- Availability of alternative services - The supportive services sought by parents are available through other programs or channels that do not require a VPA, including:
  - Autism Waiver Program - If a child is in the Autism Waiver Program, residential placement may be approved and is a covered service under this waiver.
  - Core Service Agency (CSA) Placement - The local CSA is charged with being the lead agency for children who are receiving Medical Assistance in need of an RTC and who are not in the custody of DHS. In these cases, the local school system must approve funding for education.
  - Private insurance covers the RTC placement - If parents have private insurance coverage, there would not be a need for the LDSS to get involved and pursue a VPA, unless educational services require funding.

**Table 3**

	<b>Baltimore Region</b>	<b>Eastern Shore</b>	<b>Metro Region</b>	<b>Southern MD</b>	<b>Western MD</b>	<b>Total</b>
Need to exhaust community resources/referred to community resources	0	5	5	1	2	<b>13</b>
Parents did not submit sufficient documentation by psychologist, psychiatrist, or physician	0	0	0	10	0	<b>10</b>
Child became a CINA	2	4	1	1	0	<b>8</b>
Child eligible to be placed under Autism Waiver	0	0	0	0	0	<b>0</b>

Child transferred to Core Service Agency or another State Agency for placement or services.	1	1	0	0	0	2
One parent was not in agreement with VPA, and child was placed with that parent or another relative	0	0	0	0	0	0
Parents used private insurance for placement	2	0	0	0	0	2
Parents withdrew/did not follow through/did not meet VPA criteria	21	13	9	0	2	45

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**TYPE OF INITIAL PLACEMENT FOR APPROVED VOLUNTARY PLACEMENT AGREEMENTS**

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Table 4 provides data on the type of initial placement for approved VPAs.

**Table 4**

	<b>Residential Treatment Center (RTC)</b>	<b>Group Home (Traditional)</b>	<b>Therapeutic Group Home (DDA)</b>	<b>Therapeutic Foster Home</b>	<b>Diagnostic</b>
Baltimore Region	4	0	1	0	5
Eastern Shore	4	0	0	0	6
Metro Region	4	0	0	0	1
Southern Maryland	2	0	0	0	1
Western Maryland	7	0	1	0	1
<b>Total</b>	<b>21</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>14</b>